

**UNITED STATES PATENT & TRADEMARK
Washington, D.C. 20231**

OFFICE

REQUEST FOR PATENT FEE REFUND														
1 Date of Request: <u>9/10/01</u>		2 Serial/Patent # <u>09/730,194</u>												
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT										
<input type="checkbox"/>	Filing			\$										
<input type="checkbox"/>	Amendment			\$										
<input type="checkbox"/>	Extension of Time			\$										
<input type="checkbox"/>	Notice of Appeal/Appeal			\$										
<input type="checkbox"/>	Petition			\$										
<input type="checkbox"/>	Issue			\$										
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$										
<input type="checkbox"/>	Maintenance			\$										
<input checked="" type="checkbox"/>	Assignment			\$										
<input checked="" type="checkbox"/>	Other <u>Clawback</u>			\$ <u>4/0</u>										
		7 TOTAL AMOUNT OF REFUND		\$ <u>4/0</u>										
10 REASON:		8 TO BE REFUNDED BY:												
		<input checked="" type="checkbox"/> Treasury Check												
		Credit Deposit A/C #:												
<input checked="" type="checkbox"/>	Overpayment	9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>												
<input type="checkbox"/>	Duplicate Payment													
<input type="checkbox"/>	No Fee Due (Explanation):													
<u>Applicant did not give Authorization to</u> <u>Right to deposit money</u>														
11 REFUND REQUESTED BY:														
TYPED/PRINTED NAME: <u>Tony Black</u>		TITLE: <u>Inventor</u>												
SIGNATURE: <u>[Signature]</u>		PHONE: _____												
OFFICE: _____														
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****														
APPROVED: _____		DATE: _____												

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**